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FORM D



03026775

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPF	
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ge burden
hours per respon	ise16.00

SEC USE ONLY							
Prefix	Serial						
DATE RE	CEIVED						
	1						

N com : (
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Stroud Oil Properties, Inc. Private Placement of Common Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	ECC RECEIVED
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	JUL 1 1 2003
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Stroud Oil Properties, Inc.	181 (6101
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
210 West Sixth Street, Suite 500, Fort Worth, TX 76102	(817) 882-8000
Address of Principal Business Operations (Number and Street, City. State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	Como
Same	Same
Brief Description of Business	
Oil and Gas Exploration, Development and Production	
Type of Business Organization	DBOCF29EN
	lease specify):
business trust limited partnership, to be formed	lease specify): PROCESSED JUL 15 2003
Month Year	
	nated THOMSON
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	/ FINANCIAL
CN for Canada, FIN for other foreign jurisdiction)	ο κ

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission. 450 Fifth Street. N.W. Washington, D.C 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

BASIC IDENTIFICATION DATA Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years, • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Executive Officer Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Noyes, Patrick J. Business or Residence Address (Number and Street, City, State, Zip Code) 210 West Sixth Street, Suite 500, Fort Worth, TX 76102 Check Box(es) that Apply: Executive Officer Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Stephens, Lester K. Business or Residence Address (Number and Street, City, State, Zip Code) 210 West Sixth Street, Suite 500, Fort Worth, TX 76102 Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Hammack, Christopher L. Business or Residence Address (Number and Street, City, State, Zip Code) 210 West Sixth Street, Suite 500, Fort Worth, TX 76102 Check Box(es) that Apply: ▼ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Braden, Bruce F. Business or Residence Address (Number and Street, City, State, Zip Code) 40 Poplar Drive, Kentfield, CA 94904 Check Box(es) that Apply: Executive Officer General and/or **▼** Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Robert S. Colman Business or Residence Address (Number and Street, City, State, Zip Code) 300 Tamal Place, Suite 280, Corte Madera, CA 94925 Executive Officer Check Box(es) that Apply: Promoter ■ Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Wright, Christopher A. Business or Residence Address (Number and Street, City, State, Zip Code) 600 Townsend St, Suite 160 W, San Francisco, CA 94103 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Germinario, Mark Business or Residence Address (Number and Street, City, State, Zip Code) 210 West Sixth Street, Suite 500, Fort Worth, TX 76102

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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

l				В	. INFORM	ATION AB	OUT OFFE	RING				
I IIaadh		.1.44	. 41 :		11 4	1:4.	J:	in this at	Comina a D		Yes	No
I . Has tn	e issuer so	ola, or does	s the issuer						•			X
2 11/1	41						nn 2. if filir	-			4.60	000
2. What is	s the minii	mum inves	stment that	will be ac	cepted fro	m any indi	viduai?				_	
3. Does th	3. Does the offering permit joint ownership of a single unit?									Yes	No X	
If a per or state	ssion or sir son to be l s, list the n er or deale	milar remunisted is an aname of the r. you may	ested for ea neration for associated p broker or o set forth t	solicitatio person or a dealer. It m	n of purcha gent of a broore than five	isers in con toker or dea ve (5) perso	nection wit aler register ons to be lis	th sales of s red with the sted are asse	securities is e SEC and/	n the offer or with a s	ing. state	
	e (Last nam	ne first, if in	ndividual)									
N/A Rusiness	or Residen	ce Address	(Number a	nd Street	City State	Zin Code)						
Dusiness	or recorden	ce Address	(Ivamoer a	ina Succe.	City, State.	Zip Code)						
Name of A	Associated	Broker or	Dealer									
States in V	Which Pers	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers					
(Chec	ck "All Sta	tes" or che	ck individu	al States)							_ 0	All States
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business	or Residen	ce Address	(Number a	and Street,	City, State	, Zip Code)					
			Has Solicit		nds to Solic	it Purchase	ers					
			ck individua									All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nam	e first. if ir	ndividual)									
Business o	or Residen	ce Address	(Number a	ind Street,	City, State	, Zip Code)					
Name of A	Associated	Broker or	Dealer									
States in V	Which Pers	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers					
(Chec	k "All Stat	tes" or chec	k individua	al States)						****************	[A	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check

	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ N/A	\$ N/A
	Equity.	§ 2,000,000	§ 2,000,000
	Common Preferred		
	Convertible Securities (including warrants)	§ N/A	\$ N/A
	Partnership Interests.	\$ N/A	\$ N/A
	Other (Specify	S N/a	\$ N/A
	Total	§ 2,000,000	\$ 2,000,000
	Answer also in Appendix, Column 3. if filing under ULOE.		
2. E	nter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is *'none" or "zero."	;	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors.	4	§ 2,000,000
	Non-accredited Investors	0	<u> </u>
	Total (for filings under Rule 504 only)	4	\$ 2,000,000
	Answer also in Appendix, Column 4, if filing under ULOE.		
3. If	this filing is for an offering under Rule 504 or 505. enter the information requested for all securities sold by the issuer, to date. in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>0</u>
	Printing and Engraving Costs		\$ <u>0</u>
	Legal Fees.		\$ <u>0</u>
	Accounting Fees		\$ <u>0</u>
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		\$_0
	Other Expenses (identify)		\$ <u>0</u>
	Total	Γ_	1 S 0

	OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
and total expe	enses furnished in response to Part (ffering price given in response to Part CQuestion 1 CQuestion 4.a. This difference is the "adjusted gross		§2,000,000
each of the p	urposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and all of the payments listed must equal the adjusted gross Part CQuestion 4.b above.		
			Payments to Officers.	
			Directors, & Affiliates	Payments to Others
Salaries and	fees		□ \$ <u>0</u>	□ \$ <u>0</u>
Purchase of r	eal estate		□ \$ <u>0</u>	□ \$ <u>0</u>
	ntal or leasing and installation of m	nachinery	□ <u>\$</u> 0	\[\s\ 0 \]
Construction	or leasing of plant buildings and t	facilities	s_ <u></u>	s_ <u></u>
offering that	may be used in exchange for the a	value of securities involved in this seets or securities of another	□ , 0	□ s 0
				\$\frac{0}{5}\$
			_	□ \$ 0
			\$ 2,000,000	
omer (speen)	·			
			S	
Column Tota	ls		<u>\$ 2,000,000</u>	□ \$ <u>0</u>
Total Paymer	nts Listed (column totals added)		□ <u>\$ 2,0</u>	000,000
		D. FEDERAL SIGNATURE		<u> </u>
signature constitu	es an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Commis coredited investor pursuant to paragraph (b)(2) of Ru	sion, upon written	
Issuer (Print or Type	pe)	Signature	Date	
Stroud Oil Prop	erties, Inc.	Patrick J. Naues	July 10, 2003	
Name of Signer (P	rint or Type)	Title of Signer (Frint or Type)		
Patrick J. Noye	3	President and Chief Executive Officer		

- ATTENTION ----

		E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 proprovisions of such rule?			Yes No	
	See	Appendix, Column 5, for state res	sponse.		
2.	The undersigned issuer hereby undertakes to fu D (I 7 CFR 239.500) at such times as required	•	any state in which this notice is file	ed a notice on For	rm
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the state administrators	upon written request, information	on furnished by th	:he
4.	The undersigned issuer represents that the issilimited Offering Exemption (ULOE) of the sta of this exemption has the burden of establishing	te in which this notice is filed and	understands that the issuer claiming		
	er has read this notification and knows the conterchorized person.	ats to be true and has duly caused the	nis notice to be signed on its behalf	by the undersigned	ed
Issuer (I	Print or Type)	Signature	Date		
Stroud	Oil Properties, Inc.	Patrick). Naue	July 10, 2003		
Name (F	Print or Type)	Title (Print of Type)	<u>, </u>		

President and Chief Executive Officer

Instruction:

Patrick J. Noyes

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 4 5 1 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach Type of investor and to non-accredited offering price explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount Investors Amount No Yes ALΑK ΑZ AR Common Stock X $\mathsf{C}\mathsf{A}$ \$2,000,000 | 0 0 CO CTDE DC FL GA HI ID IL INIΑ KS KY LA ME MD MA ΜI MN MS

A. C. I. L

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				APP	ENDIX					
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
MT										
NE										
NV										
NH										
NJ										
NM						_	L			
NY										
NC										
ND										
ОН										
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UT								_		
VT										
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				APPI	ENDIX				
1	to non-a	2 I to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Itern 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									